

HEPCAP II: Hepatitis C in the California Prisons Project

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Project Description: This is a study of hepatitis C virus (HCV) infection in the California State Correctional System that began in December, 2000. This comprehensive multi-site investigation has included epidemiological, clinical and policy studies. Our HEPCAP investigation continues with data analyses, reports and follow-up and a recent publication in the *Journal of Clinical Infectious Diseases* (CID 2005: 41 (July 2005)). As well, the second phase of the study, HEPCAP II, is in its second year of enrollment. HEPCAP II's primary goals are:

- To conduct a study of HCV-related risks amongst parolees who are US Veterans
- To screen HCV-positive study participants for treatment candidacy and provide them with information and referrals as necessary, and
- To educate all veteran parolees about HCV and how they can keep themselves healthy whether infected or not-infected with the virus.
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In meeting these goals, the HEPCAP II Study also continues to:

- Provide Federal, State and Public Health departments and agencies with estimates of the percentage of US Veteran parolees who are infected with Hepatitis C along with information about behaviors and risks associated with infection.
- Identify barriers in access to quality health care for US Veteran parolees, and
- Make recommendations for the screening of HCV-positive US Veteran parolees for HCV treatment candidacy.

Interesting Findings: Epidemiological data from the first HEPCAP study data indicate that the HCV prevalence amongst new parolees within the California Correctional System is 41.5%, which is over 20 times greater than that found amongst the general U.S. population (1.8%). It is also estimated that 65% of California state prisoners are re-incarcerated after release, which suggests that a high percentage of California's over 300,000 inmates and parolees are in a continual cycle between their communities and the State Correctional System. This combination of high HCV prevalence amongst parolees and the potential for them to continue to engage in high HCV-related risk behaviors both in prison and in their communities, coupled with California's – and other states' - large prison and parolee populations, has made HCV not just a prison health issue but also a larger community and public health concern. Although the treatment of HCV-infected individuals undoubtedly stands as one approach to solving the larger problem of HCV in the California Prison System, treatment in and of itself presents a whole host of other problems, the most obvious of these being the high cost of HCV-medications and the likelihood that individuals on parole will not be able to afford treatment. However, for a particular subgroup of this population, namely parolees who are also US Veterans, access to HCV-treatment is more feasible given that it is generally covered by their veterans' health benefits. Yet due to their likelihood of re-incarceration it is often the case that those who start on medications while on parole are unable to complete a full course of treatment, which in turn decreases their chances of attaining a sustained virological response (SVR).